

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 2950 - 060834
Application Number    10/573,635		Filed   9/27/2004
For   "Steel/Aluminum Welded Structure"		
Art Unit   1794		Examiner   Jason L. Savage
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):		
	<u>Fee</u>	<u>Small Entity Fee</u>
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65                  \$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245                 \$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555                \$ 1110
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865                \$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175              \$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input checked="" type="checkbox"/> Payment by credit card.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number                  23-0650 .		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
I am the	<input type="checkbox"/> applicant/inventor.	
	<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).	
	<input checked="" type="checkbox"/> attorney or agent of record. Registration Number                  25,363	
	<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34                  _____	
_____ Signature		_____ Date
Russell D. Orkin		412-471-8815
Typed or printed name		Telephone Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input checked="" type="checkbox"/> Total of                  1                  forms are submitted.		